



Clark County Department of Building

Fire Prevention Bureau

4701 W Russell Rd • Las Vegas, NV 89118 • Phone: (702) 455-7100 • Fax: (702) 735-0775

Next Day or Express Plan Review Application

\$160 minimum application fee is due at time of submittal.

Fee is payable in exact cash, check/money order (drawn from US bank – payable to CCFD), or FD escrow account only.

Application Date: _____ **Payment Type:** Cash Check -or- FD Escrow Account #: _____
(Please check one)

FPB Code Enforcement Case No.: (If applicable) _____

Building Permit No.: (If applicable) _____

Please check appropriate box

Next Day Review (In by noon – out by noon next business day)

- ☐ Automatic Emergency Vehicle Access Gates (FAEC)
- ☐ Automatic Sprinkler TI - Alter Existing System (FDSB)
(20 heads or less excluding hydraulic calculations, flex-head, or extended coverage sprinklers)
- ☐ Automatic Sprinkler Systems Design – Flow test (FDSF)
- ☐ Automatic Sprinkler In-Building Riser (FDSI)
- ☐ Automatic Sprinkler Monitoring System (FDSM)
- ☐ Elevator Recall (FDER)
- ☐ Fire Alarm Monitoring System (FDFA)
- ☐ Fire Hydrant Bond Release (FDFH)
- ☐ Manual Emergency Vehicle Access Gates (FAGM)
- ☐ Underground Fire Service Mains – Installation of hydrants and/or related components (FMHI)
- ☐ Underground Fire Service Mains – Mylar Signature (FDUM)

Express Review (5 business days)

- ☐ Automatic Sprinkler TI – Alter Existing System (FDSD)
 - 50 heads or less excluding hydraulic calculations, flex-head, or extended coverage sprinklers
 - 13-D systems
- ☐ Fire Alarm TI - Alter Existing System (FFAD)
(10 peripheral fire alarm devices or less)
- ☐ Liquefied Petroleum Gases, Residential (FLRC)
- ☐ Final Map Signature (FDFM)
* No related fees for this service *

PERMIT INFORMATION

Plans: New Revision Correction **Application # (If applicable):** _____
(Please check one) *Note: If plan is a revision or a correction then the original application number must be provided.*

Municipal Project/Property: Yes or No **APN:** _____

Property Address: _____ **Bldg-Suite#:** _____

Major Property Name: _____
(i.e.: Name of development, building, project or other identifying information)

Sub-Property Location: _____
(i.e.: Name of business, shop, project or other identifying information within Major Property)

APPLICANT INFORMATION

Submitting Company Name: _____

Mailing Address: _____ **Bldg-Suite #:** _____

City, State, Country, Zip Code: _____

Company E-mail Address: _____

Company Phone #: _____ **Company Fax #:** _____

Applicant Phone #: _____ **Ext:** _____ **Fax #:** _____

Applicant E-Mail Address: _____

Applicant Name and Title

Applicant Signature

Website: http://www.clarkcountynv.gov/Depts/development_services/fire_prevention **Email:** Permits@ClarkCountyNV.gov